

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

IN RE:

PATRIOT ONE, INC.,

Debtor.

PATRIOT ONE, INC.,

Movant,

vs.

Bankruptcy No. 16-23160-GLT

Chapter 11

Document No.:

Related to Doc. No.: 255

NO RESPONDENT.

AMENDMENT COVER SHEET

Amendment(s) to the following petition, list(s), schedule(s), or statement(s) are transmitted herewith:

_____ Voluntary Petition - *Specify reason for amendment:*

_____ Official Form 6 Schedules (Itemization of Changes Must Be Specified)

_____ Summary of Schedules

_____ Schedule A - Real Property

_____ Schedule B - Personal Property

_____ Schedule C - Property Claimed as Exempt

_____ Schedule D - Creditors holding Secured Claims

Check one:

_____ Creditor(s) added

_____ NO creditor(s) added

_____ Creditor(s) deleted

_____ Schedule E - Creditors Holding Unsecured Priority Claims

Check one:

_____ Creditor(s) added

_____ NO creditor(s) added

_____ Creditor(s) deleted

X Schedule F - Creditors Holding Unsecured Nonpriority Claims: **Schedule F has been amended to reflect that the claim of Next Wave Enterprises, LLC is undisputed**

Check one:

_____ Creditor(s) added

X NO creditor(s) added

_____ Creditor(s) deleted

_____ Schedule G - Executory Contracts and Unexpired Leases

Check one:

_____ Creditor(s) added

_____ NO creditor(s) added

_____ Creditor(s) deleted

_____ Schedule H - Codebtors

_____ Schedule I - Current Income of Individual Debtor(s)

_____ Schedule J - Current Expenditures of Individual Debtor(s)

_____ Statement of Financial Affairs

_____ Chapter 7 Individual Debtor's Statement of Intention

_____ Chapter 11 List of Equity Security Holders

_____ Chapter 11 List of Creditors Holding 20 Largest Unsecured Claims

_____ Disclosure of Compensation of Attorney for Debtor

_____ Other: _____

NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES

Pursuant to Fed.R.Bankr.P. 1009(a) and Local Bankruptcy Rule 1009-1, I certify that notice of the filing of the amendment(s) checked above has been given this date to the U.S. Trustee, the trustee in this case, and to entities affected by the amendment as follows:

Date: December 4, 2017

/s/Robert O Lampl
ROBERT O LAMPL
PA I.D. #19809
JOHN P. LACHER
PA I.D. #62297
DAVID L. FUCHS
PA I.D. #205694
RYAN J. COONEY
PA I.D. #319213
Counsel for the Debtor
223 Fourth Avenue, 4th Floor
Pittsburgh, PA 15222
(412) 392-0330 (phone)
(412) 392-0335 (facsimile)
Email: rlampl@lampllaw.com

Note: An amended matrix of creditors added by the amendment must be submitted on disk with the amendment. Attorneys filing electronically on the Case Management/Electronic Case Filing System may add creditors to the case electronically.

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA**

IN RE:

PATRIOT ONE, INC.,

Debtor.

PATRIOT ONE, INC.,

Movant,

vs.

NO RESPONDENT.

Bankruptcy No. 16-23160-GLT

Chapter 11

Document No.:

Related to Doc. No.: 255

CERTIFICATE OF SERVICE

Robert O Lampl, John P. Lacher and David L. Fuchs, hereby certify, that on the 4th day of December, 2017, a true and correct copy of the foregoing **AMENDMENT TO SCHEDULE F** was served upon the following (via electronic notification):

Office of U.S. Trustee
Liberty Center, Suite 970
1001 Liberty Avenue
Pittsburgh, PA 15222

Samuel R. Grego
Two PPG Place, Suite 400
Pittsburgh, PA 15222-5402

Date: December 4, 2017

/s/ Robert O Lampl
ROBERT O LAMPL
PA I.D. #19809
JOHN P. LACHER
PA I.D. #62297
DAVID L. FUCHS
PA I.D. #205694
RYAN J. COONEY
PA I.D. #319213
Counsel for the Debtor
223 Fourth Avenue, 4th Floor
Pittsburgh, PA 15222
(412) 392-0330 (phone)
(412) 392-0335 (facsimile)
Email: rlampl@lampllaw.com

Fill in this information to identify the case:

Debtor name Patriot One, Inc.United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIACase number (if known) 16-23160☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.☐ Yes. Go to line 2.**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing address

43rd Street Concrete
1 43rd Street
Pittsburgh, PA 15201-3194

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: Check all that apply

☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: Business DebtIs the claim subject to offset? ☒ No ☐ Yes

\$2,372.73

3.2 Nonpriority creditor's name and mailing address

A&H Equipment
1124 McLaughlin Run Road
Bridgeville, PA 15019-2533

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: Check all that apply

☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: Business DebtIs the claim subject to offset? ☒ No ☐ Yes

\$10,239.19

3.3 Nonpriority creditor's name and mailing address

Advanced Builders Inc.
321 Cobble Lane
Belle Vernon, PA 15012

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: Check all that apply

☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: Business DebtIs the claim subject to offset? ☒ No ☐ Yes

\$18,550.00

3.4 Nonpriority creditor's name and mailing address

AIG
USG Insurance Services Inc.
1000 Town Center Way, Suite 300
Canonsburg, PA 15317

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: Check all that apply

☐ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: Business DebtIs the claim subject to offset? ☒ No ☐ Yes

\$8,478.00

Debtor **Patriot One, Inc.**Case number (if known) **16-23160**

3 5	Nonpriority creditor's name and mailing address Beacon Supply Company, Inc. P.O. Box 188 Belle Vernon, PA 15012 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$624.34
3 6	Nonpriority creditor's name and mailing address Belmont Aggregates 125 Carrie Street Powhatan Point, OH 43942 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,091.96
3 7	Nonpriority creditor's name and mailing address Beth's Barricades 1623 Middle Road Ext. Gibsonia, PA 15044 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,094.00
3 8	Nonpriority creditor's name and mailing address Black Diamond Equipment Rental 4100 Morgantown Industrial Park Morgantown, WV 26501 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,190.00
3 9	Nonpriority creditor's name and mailing address Bobcat of Pittsburgh 20620 Route 19 North Cranberry Twp, PA 16066 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$73,856.42
3 10	Nonpriority creditor's name and mailing address CAT Financial P.O. Box 978595 Dallas, TX 75397-8595 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$41,141.32
3 11	Nonpriority creditor's name and mailing address Cintas 320 Westec Drive Mount Pleasant, PA 15666 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,124.84

Debtor **Patriot One, Inc.**Case number (if known) **16-23160**

3.12 Nonpriority creditor's name and mailing address Cleveland Brothers Equipment Co. 4565 William Penn Highway Murrysville, PA 15668 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,431.00
3.13 Nonpriority creditor's name and mailing address Coen Oil Company 1045 W. Chestnut Street Washington, PA 15301 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,028.38
3.14 Nonpriority creditor's name and mailing address Colony Specialty Insurance Company 8720 Stony Point Parkway #300 Richmond, VA 23235 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,531.00
3.15 Nonpriority creditor's name and mailing address Coventry Health / Health America Transworld Systems Inc. P.O. Box 15095 Wilmington, DE 19850-5095 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,636.37
3.16 Nonpriority creditor's name and mailing address Culverts 330 Pittsburgh Avenue Coraopolis, PA 15108 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,209.68
3.17 Nonpriority creditor's name and mailing address Emory Rothenbuhler & Sons, Inc. 47216 Sunfish Creel Road Beallsville, OH 43716 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,375.00
3.18 Nonpriority creditor's name and mailing address Enterprise 4489 Campbells Run Road Pittsburgh, PA 15205-1311 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,663.97

Debtor **Patriot One, Inc.**Case number (if known) **16-23160**

3 19	Nonpriority creditor's name and mailing address Equipment Connection P.O. Box 283 Pricedale, PA 15072 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,470.39
<hr/>			
3 20	Nonpriority creditor's name and mailing address Farnham & Pfile 4306 State Route 51 South Belle Vernon, PA 15012 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,635.81
<hr/>			
3 21	Nonpriority creditor's name and mailing address Fayette Parts NAPA 600 Market Street Brownsville, PA 15417 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,537.62
<hr/>			
3 22	Nonpriority creditor's name and mailing address Golden Eagle P.O. Box 945 Uniontown, PA 15401 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,417.88
<hr/>			
3 23	Nonpriority creditor's name and mailing address Groff Tractor 963 N. Center Avenue New Stanton, PA 15672 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,344.26
<hr/>			
3 24	Nonpriority creditor's name and mailing address John D. Caruso Inc. 1029 Forest Ave. Homestead, PA 15120 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52,822.50
<hr/>			
3 25	Nonpriority creditor's name and mailing address John Deere / Murphy Tractor Power Plan P.O. Box 5328 8402 Excelsior Drive Madison, WI 53705-0328 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,619.52

Debtor **Patriot One, Inc.**Case number (if known) **16-23160**

Name

3 26	Nonpriority creditor's name and mailing address John Deere Credit 6400 NW 86th Street PO Box 6600 Johnston, IA 50131-6600 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,029.78
3 27	Nonpriority creditor's name and mailing address Laurel Aggregates 200 Lakewood Center, Suite 270 Morgantown, WV 26508 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,070.73
3 28	Nonpriority creditor's name and mailing address Lexus Financial P.O. Box 3025 Coraopolis, PA 15108 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,433.00
3 29	Nonpriority creditor's name and mailing address McCutcheon Enterprises Inc. 250 Park Road Apollo, PA 15613 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,781.97
3 30	Nonpriority creditor's name and mailing address Model Uniforms 100 Third Street Charleroi, PA 15022 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,704.27
3 31	Nonpriority creditor's name and mailing address National Road 197 Alter Road Natrona Heights, PA 15065 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,113.43
3 32	Nonpriority creditor's name and mailing address Neiswonger Construction 17592 Route 322 Strattanville, PA 16258 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,654.69

Debtor **Patriot One, Inc.**

Case number (if known)

16-23160

3.33	Nonpriority creditor's name and mailing address Next Wave Enterprises LLC 5757 Blue Lagoon Drive, Suite 170 Miami, FL 33126 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$70,000.00
3.34	Nonpriority creditor's name and mailing address Pearl Beta Funding 100 William Street, Ninth Floor New York, NY 10038 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$91,000.00
3.35	Nonpriority creditor's name and mailing address Penn Credit EZ Pass Violations 916 S. 14th Street Harrisburg, PA 17108-0988 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$864.70
3.36	Nonpriority creditor's name and mailing address Pierre Luti Advertising 79 Kendric Avenue Donora, PA 15033 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$450.00
3.37	Nonpriority creditor's name and mailing address RECO Equipment Inc. 20620 Route 19 North Cranberry Twp, PA 16066 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$202,849.60
3.38	Nonpriority creditor's name and mailing address Ryder Transportation PO Box 96723 Chicago, IL 60693 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,244.92
3.39	Nonpriority creditor's name and mailing address SITECH Allegheny 200 Bursca Drive #205 Bridgeville, PA 15017 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,500.00

Debtor **Patriot One, Inc.**
NameCase number (if known) **16-23160**

3 40 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply** **\$4,900.00**
Swank Construction Company
404 S Main Street
Washington, PA 15301
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
☐ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: Business Debt
 Is the claim subject to offset? ☒ No ☐ Yes

3 41 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply** **\$16,173.00**
SWIF
P. O. Box 5100
100 Lackawanna Avenue
Scranton, PA 18505-5100
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
☐ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: Business Debt
 Is the claim subject to offset? ☒ No ☐ Yes

3 42 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply** **\$235.74**
Valley Tire Company
1002 Arentzen Boulevard
Charleroi, PA 15022
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
☐ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: Business Debt
 Is the claim subject to offset? ☒ No ☐ Yes

3 43 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply** **\$90,000.00**
Yellowstone Capital
1 Evertrust Plaza
14th Floor
Jersey City, NJ 07302
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
☐ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: Business Debt
 Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b.	+ \$ 947,492.01
5c.	\$ 947,492.01